DATEM ADDITION FOR DETERMINATION BEAC								Application or Docket Number							
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000										09820474					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			12					RATE		FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 355.00		355.00	OR	BASIC FEE	710,00		
TOTAL CHARGEABLE CLAIMS			/ 2 minus 20=		· A			X\$ 9==			OR	X\$18=			
INDEPENDENT CLAIMS			6 minus 3 =		. 3			X40=			OR	X80=	240		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+135=				OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2		TOTA	7		OR	TOTAL	450		
3	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								LL 4	ENTITY	OR	OTHER SMALL			
A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 12	Minus	^	<u>)</u>	=		X\$ 9=			OR	X\$18=			
AMENDMENT	Independent	. 6	Minus		3	•		X40=			OR	X80=			
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+135	ستي		OR	+270=			
							į	TO ADDIT, F	TAL		00	YOYAL ADDIT, FEE			
<u>:</u>	5-31-05	<u>.</u>													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA		RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	12	Minus	. 5	<u> </u>	-		X\$ 9)= 		OR	X\$18=	·		
ARE	Independent	NTATION OF M	Minus	***	TO AIM	- -	1	X40	=		OR	X80=			
┞	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135	j=		OR	+270=			
								YO ADDIT. I	TAL FEE		OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)										•	_				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RAT	ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus			=	▋┃	X\$ 9	=		OR	X\$18=			
ARE	Independent	•	Minus		T CL AIL	-	4	X40	=		OR	X80=			
ᅡ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+270=			
:	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. The Trighest Number Previously Paid For" IN ThitS SPACE is less than 20, enter "20."								TAL	•	OR	TOTAL ADDIT, FEE			
	'If the "Highest Nu	mber Previously P	aid For IN TH	S SPACE	is less th	en 3, enter "3."		ADDIT. F und in th		propriate ho	•				